

TennCare Pharmacy News



STATE OF TENNESSEE
BUREAU OF TENNCARE
DEPARTMENT OF FINANCE AND ADMINISTRATION
729 CHURCH STREET
NASHVILLE, TENNESSEE 37247-6501

The State of Tennessee, Bureau of TennCare, through its prescription benefits manager, Affiliated Computer Services, Inc. (ACS), has developed a Preferred Drug List in an effort to select both clinically sound and cost effective medications for use by the enrollees of TennCare. **On October 15, 2003 the first phase of the TennCare Preferred Drug List will be implemented and the Grier Consent Decree override will change from a 14-day to a 3-day emergency supply. Please ensure that preferred drugs are dispensed.**

Claims submitted on behalf of members attempting to receive a non-preferred agent after October 14, 2003 will reject for Prior Authorization required, NCPDP reject code 75. In the event a TennCare enrollee presents a prescription to the pharmacy that is not on the TennCare PDL and has not been previously approved by the TennCare pharmacy benefits manager (PBM), the pharmacy provider should attempt to contact the prescriber for authorization to change the prescription to a PDL alternative. If the prescriber is unavailable, the pharmacy may dispense an interim three (3) day supply of the prescribed medication. The pharmacy should attempt to contact the prescriber again before the enrollee has consumed the three-day supply. If the pharmacy still cannot reach the prescriber or if the prescriber is unwilling to change the original prescription to a covered PDL alternative, then the pharmacy should dispense the remainder of the original prescription and any authorized refills for as long as the prescription is valid.

Please Note:

- The dispensing pharmacist may obtain a 3-day emergency override (Modified Grier Override) by entering an “8” in the Prior Authorization Type Code (NCPDP 461-EU) on a Point of Sale 5.1 claim. For 3.2(3C) Point of Sale claims, submit an “8” in the Medical Certification portion of the Prior Authorization Medical Certification (PAMC) field (NCPDP 416-DG).
- If a 3-day emergency override has already been given and the prescriber is unavailable, the pharmacist may enter a “1” in the Prior Authorization Type Code (NCPDP 461-EU) or the Medical Certification portion of the Prior Authorization Medical Certification (PAMC) field (NCPDP 416-DG) to fill the remainder of the prescription.
- The dispensing pharmacist may enter a “7” in the Submission Clarification Code (Field 420-DK) on the Point of Sale 5.1 or in the Prescription Denial Clarification field (NCPCP 420) of a 3.2(3C) claim to fill the prescription in the following two situations:
 1. If the 3-day override has been performed and there is a need to change the NDC or drug strength for the remainder of the prescription.
 2. The dispensing pharmacist has contacted the prescriber and the prescriber deems the non-preferred drug medically necessary, but has not contacted ACS for a prior authorization in a timely manner.

These codes are closely monitored and pharmacies with excessive usage are subject to review and audit.

Enclosed with this letter is a copy of the Preferred Drug List and a Prior Authorization Request form. Please review TennCare’s PDL website at www.tenncarepdl.com for more detailed information. Please fax Prior Authorization requests to Fax 1-866-506-4377 or call at 1-866-506-4375 for further assistance. We appreciate your efforts in helping us provide this program to TennCare members.